2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L9900006185						FILED				
KELSO OVERSEAS LLC						00 FEB -4 AMII: 16				
	·					SECRETARY	OF STA	ATE		
Principal Place of Business 941 4TH STREET. STE #200M MIAMI BEACH FL 33139		Mailing Address 941 4TH STREET, STE #200M MIAMI BEACH FL 33139-6816			TALLAHÁSSÉÉ, FLÖRÍÐA					
2. Principal Place of Business		3. Mailing Address		. <u></u>	 ·		in 33 00 53 0			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\rightarrow	DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEIN	lumber			oplied For		
Zip	Country	Zip	Countr	ry	5. Certii	ficate of Status Desired		\$5.00 Add	ditional	
	6.∠Name and Address of Current	Registered Agent		Name	7 Name	and Address of New R	legistered			
CORPORATE CREATIONS ENTERPRISES INC 941 4TH STREET #200 MIAMI BEACH FL 33139			-	City	et Address (P.O. Box Number is Not Acceptable) - 02/09/0801016017 ***********************************					
8. The above	named entity submits this statement for statement for signature, typed or printed name of registered agen				gistered agent, o		orida.		<u>.</u>	
				EE IS \$50 Departme						
9.	MANAGING MEME	BERS/MEMBERS	10.		Tal	ADDITIONS	/CHANGE			
TITLE MAME STREET ADDRESS CITY-ST-ZIP	MGRM GREER-DONNELLY, JOHN T 941 4TH STREET, #200M MIAMI BEACH FL	□ Deleta	TITLE NAME STREET CITY-1	T ADDRESS	Rue du Moul Sark Channel Islar	ŧ		⊠ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOUISE-CREBER, CHRISTIANNE 941 4TH STREET, #200M MIAMI BEACH FL	☐ Detate	TITLE MAME STREE CITY- 8	T ADDRESS	Little Rocque	lelena Louise Creber s Flat, Rocques de St C Sampsons, Guernsey G				
HAME STREET ADDRESS CITY-ST-ZIP	MGRM———————————————————————————————————	Octobs, sta	NAME	T ADDRESS	Trollaby Ho	Peter Eaton— ouse, Trollaby Lane, IM4 4AW, Isle of Man	, U.K.	Change	Addition	
TITLE NAME STREET ADDRESS GITY-ST-ZIP		☐ Deletu	TITLE NAME STREET CITY-1	T ADDRESS		M/		☐ Change	Addition	
TITLE MAME STREET ADDRESS GITY- ST- ZIP		Detecto	TITLE NAME STREET CITY-S	T ADDRESS				☐ Change	Addition	
TITLE NAME STREET ADDRESS GITY-SI-ZIP	,	☐ Delete	TETLE NAME STREET CITY-1	T AODRESS BT-ZIP				☐ Change	Additto	
indicated	pertify that the information supplied with on this report is true and accurate and billty company or the receiver or truste	I that my signature shall have	e the same	legal effect a	is if made under	oath; that I am a manag				

0044 1481 83 220 1 Daytime Phone #